Collin County Development Services Permit Application

Owner/Buyer Name: Current Maili		ress (Street, City and Zip):		Daytime Pho	Daytime Phone #:	
Renter Name (if applicable) Address to mail OSSF (Septic) License to Operate System (Street, City at			d Zip): Alternate Ph	one #:		
Project 911 Address (If different from	n above):					
Detailed Directions to Project Site:						
Sciance Directions to Froject Site.						
PROJECT	DESCRIPTION (PLE	EASE CIRCLE OR CO	MPLETE ALL APPLICAB	LE AND N/A ALL NON-	APPLICABLE)	
New Construction	Septic System	Electric – New Structure	Electric – Existing Structure	Project Information:	:	
SITE BUILT HOUSE	NEW	MOBILE HOME		A/C SQ. FT.		
BARN/SHOP/GARAGE	REPAIR	RELOC. HOUSE	GARAGE	# OF BEDROOMS # OF BATHS		
SWIMMING POOL	UPGRADE	POWER POLE	UPGRADE	# OF KITCHENS		
REMODEL/ADDITION	IN CITY LIMITS		PURCHASE	with ISLAND:	Y or N	
IF EXISTING SEPTIC SYS	TRAVEL TREE.		GARAGE: ATTACHED of JACUZZI TUB: Y o			
POSSIBLE:				FIREPLACE: Y or N w/LOG LIGHTER: Y or N HEAT: ELECTRIC or LP		
NAME OF ORIGINAL PERMIT HOLDER:						
TYPE OF SYSTEM: A		APPROX.	AGE:	WATER HEAT: ELECTRIC or LP		
PERMIT #: INSTALLER:			TYPE OF NEW SEPTIC I	BEING INSTALLED:		
BRIEFLY DESCRIBE T	TYPE OF WORK	BEING DONE:				
		CONTRACT	OR INFORMATION	 J		
		E THE COMPANY N	NAME, ADDRESS AND	TELEPHONE NUMBER		
	COMPANY NAME		RACTOR WORKING O ADDRESS (STREET, CI		<u>PHONE</u>	
BUILDER						
DI III MED						
~~~~						
EVALUATOR (INDIVIDUA	,					
SEPTIC INSTALLER						
INSTALLER (INDIVIDUAL	L'S NAME)			_		
POWER CO.:		_ ACCT#:		_ GAS CO.:		
CONTACT NAME FOR	R QUESTIONS AN	D PERMIT PICI	K UP (PERMIT CAN	NOT BE ISSUED WIT	THOUT CONTACT INFO):	
NAME:						
OWNER/BUYER SIGN						
OSSF OWNER SIGNAT	FURE					
(IF DIFFERENT FROM APP	LICANT):			DATE:		